



November 6, 2018

Web Announcement 1738

Modernization: Attention All Providers: Providers Will See New Edit Codes

The Division of Health Care Financing and Policy (DHCFP) will implement a new, modernized Medicaid Management Information System (MMIS) on February 1, 2019. In preparation for the new MMIS, please be advised that new edit codes will be used in the new MMIS and current edit codes may behave differently.

Please be aware of the following changes:

- **HIPAA compliant billing:** Providers must submit claims with valid information following the standards in the HIPAA implementation guides (on the [Centers for Medicare & Medicaid Services \(CMS\) website](#)) and the [Nevada Medicaid Companion Guides](#) (on the Nevada Medicaid website). Below are some examples of validations that will be performed:
 - National Provider Identifiers (NPIs)
 - Condition codes
 - Value codes
 - Occurrence codes
 - Provider signature on claim header
 - Present on Admission (POA) codes
- **Physician-Administered Drug (PAD) claims:** Claims for physician/outpatient-facility administered drugs will require both National Drug Codes (NDCs) and Healthcare Common Procedural Coding System (HCPCS) codes.

The provider training sessions in January 2019 will include a review of remittance advices. Provider training sessions will be listed on the [Modernization Project](#) webpage, which also includes registration instructions.